

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Cleek for Congress

A. Full Name (Last, First, Middle Initial) Denis Westphal			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>05</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		05		2015
M M M	/	D D D	/	Y Y Y Y Y										
08		05		2015										
Mailing Address 3279 Sheltering Oak Ct.			Transaction ID : A-CF123											
City Chico	State CA	Zip Code 95928	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>							500				
					500									
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer Self Employed		Occupation Physician												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>								500				
					500									

B. Full Name (Last, First, Middle Initial) Gary A Anderson			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		12		2015
M M M	/	D D D	/	Y Y Y Y Y										
08		12		2015										
Mailing Address 6928 County Road 39			Transaction ID : A-CF126											
City Willows	State CA	Zip Code 95988-9618	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2000</td> </tr> </table>							2000				
					2000									
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer Self Employed		Occupation Farmer												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2000</td> </tr> </table>								2000				
					2000									

C. Full Name (Last, First, Middle Initial) Katharina Vereschagin			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>12</td> <td></td> <td>2015</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	08		12		2015
M M M	/	D D D	/	Y Y Y Y Y										
08		12		2015										
Mailing Address 3625 County Road P			Transaction ID : A-CF125											
City Orland	State CA	Zip Code 95963-9802	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>							500				
					500									
FEC ID number of contributing federal political committee. <div>C</div>														
Name of Employer n/a		Occupation Homemaker												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500</td> </tr> </table>								500				
					500									

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5"></td> <td>3000.00</td> </tr> </table>							3000.00
					3000.00					
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>							